

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	<i>MS</i>	45-	10/11
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	S A	68966	10-23-00

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral) ... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
1	12/8/00
2	12/8/00
3	12/8/00
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5	12/8/00
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8	12/8/00
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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